10/20/2010 14:45

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## **FEC** FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Association of State Democratic Chairs 430 S. Capitol Street SE ADDRESS (number and street) Check if different than previously DC 20003 Washington reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00259481 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 09 0 1 2010 09 30 2010 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ann Fishman Type or Print Name of Treasurer Electronically Filed by Ann Fishman 10 20 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

A. Form/Schedule: F3XN

Transaction ID:

The Committee has very limited administrative expenses because it contracts for services and does not maintain an office or staff. What administrative costs it does incur are primarily, if not exclusively, for travel and meeting expenses. These limited administrative costs are fully disclosed on its reports

FEC Form 3X (Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS 3 / 26

Write or Type Committee Name
Association of State Democratic Chairs

D <sup>®</sup>D 0 1 09 2010 0.9 3 0 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 28771.59 January 1 (b) Cash on Hand at 34314.78 Begining of Reporting Period ..... 35200.00 182692.31 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 69514.78 211463.90 6(a) and 6(c) for Column B) ..... 159039.42 17090.30 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 52424.48 52424.48 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

### For further information contact:

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 26

Write or Type Committee Name

Association of State Democratic Chairs

Report Covering the Period:

From: 0 9 M

D D D

2010

Το:

м м 0 9 <sup>D</sup> 3 0

Y Y Y Y 2 0 1 0

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Co	ontributions (other than loans) From: Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	200.00	400.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	200.00	400.00
(b)	,	0.00	0.00
(c)	(such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	200.00	400.00
	ansfers From Affiliated/Other rrty Committees	35000.00	177541.21
3. All	Loans Received	0.00	0.00
	an Repayments Receivedfsets To Operating Expenditures	0.00	0.00
(C	efunds, Rebates, etc.) arry Totals to Line 37, page 5)	0.00	4751.10
to	efunds of Contributions Made Federal candidates and Other Solitical Committees	0.00	0.00
	her Federal Receipts ividends, Interest, etc.)	0.00	0.00
	ansfers from Non-Federal and Levin Funds		
(a)	Non-Federal Account (from Schedule H3)	0.00	0.00
(b)	Levin Funds (from Schedule H5)	0.00	0.00
(c)	Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	tal Receipts (add Lines 11(d), , 13, 14, 15, 16, 17, and 18(c))	35200.00	182692.31
	tal Federal Receipts btract Line 18(c) from Line 19)	35200.00	182692.31

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 26

II. DISBURSEMENTS	COLUMN A  Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Shared Federal/Non-Federal     Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	16445.79	155709.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	16445.79	155709.07
Transfers to Affiliated/Other Party		
Committees Contributions to	. 644.51	3330.35
Federal Candidates/Committeesand Other Political Committees	0.00	0.00
. Independent Expenditure (use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		0.00
	0.00	0.00
. Loan Repayments Made	0.00	
. Loans Made	0.00	0.00
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
. Other Disbursements	0.00	0.00
. Federal Election Activity (2 U.S.C 431(20)  (a) Shared Federal Election Activity	)	
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total Disbursements (add Lines 21(c), 2		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	17090.30	159039.42
2. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	17090.30	159039.42

## **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 6 / 26

	III. Net Contributions/Operating Expenditures				
33.	Total Contributions (other than loans) from Line 11(d), page 3)	200.00	400.00		
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	200.00	400.00		
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	16445.79	155709.07		
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	4751.10		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	16445.79	150957.97		

FE6AN026

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 26 (check only one)  11a 11b 11c X 12 13 14 15 16 17
Ar or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\rangle$	NAME OF COMMITTEE (In Full) Association of State Democratic Chairs			
	Full Name (Last, First, Middle Initial) Dollars for Democrats  Mailing Address 430 S Capital St., SE  City	State	Zip Code	Date of Receipt    M M M
	Washington  FEC ID number of contributing federal political committee.  Name of Employer	DC C Occupation	20003 n	Amount of Each Receipt this Period  35000.00  Transfer
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 134400.99	

SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	35000.00
TOTAL This Period (last page this line number only)	<b>•</b>	35000.00

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE (check only one)		E 8/2								
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 2	lb [	22 28a	23			24 28c	F	25 29	F	26 30
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name												
NAME OF COMMITTEE (In Full) Association of State Democratic Chairs												
Full Name (Last, First, Middle Initial) Sprint PCS				Transa Date o					1-C	)2349-	-046	<u></u> 347
Mailing Address PO Box 62071				0 <sup>M</sup> 9	M /	<sup>D</sup> 0	2	/	Υ	ž 0 1	0 <sup>Y</sup>	
	State Zip Code MD 21264-2071			Amour	nt of Ea	ach	Dis	burse	eme	ent this	Peri	od
Purpose of Disbursement Telephone									-	99.9	9	
Candidate Name		Category Type	/									
Office Sought: House Disburse Senate President State: District:	nent For: 2002 Primary General Other (specify)											
Full Name (Last, First, Middle Initial) Nexus Strategies, Inc				Transa Date o	action of Disbu		_		)1-C	)2351-	-046	 349
Mailing Address 434 Fayetteville Street Suite 2020				0 <sup>M</sup> 9	M /	0	3	/	Υ	ž 0 1	0 <sup>Y</sup>	
	State Zip Code NC 27601			Amour	nt of Ea	ach	Dis	burse	-	ent this		od
Purpose of Disbursement Consulting Fees Candidate Name		Category							1	000.0	Ō	
		Type	/									
Office Sought: House Disburse Senate President State: District:	Primary General Other (specify)											
Full Name (Last, First, Middle Initial) Jennie Blackton				Transa Date o	action of Disbu				)1-C	)2352-	-046	 350
Mailing Address 2547 North Buena Vista				0 <sup>M</sup> 9	М /	<sup>D</sup> 0	3	/	Υ	ž 0 1	0 <sup>Y</sup>	
	State Zip Code CA 91504			Amour	nt of Ea	ach	Dis	burse		ent this	-	bd
Purpose of Disbursement Political Consultant				L.		-			1	000.00	0	
Candidate Name		Category Type										
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼											
SUBTOTAL of Disbursements This Page (optional) .			<u> </u>			_			20	099.9	9	_
TOTAL This Period (last page this line number only) FE6AN026			<u> </u>	EEC	Sche	dul	۵R	( For	·	3X) (Re		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBER:	6			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	21b	22 28a	23 28b	24 28c	25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								5
NAME OF COMMITTEE (In Full)								
Association of State Democratic Chairs								
Full Name (Last, First, Middle Initial) Financial Innovations					ion ID: 21		2353-	04651
Mailing Address 100 1st Avenue				0 <sup>M</sup> 9 M	0 3		ž 0 Ť (	) <sup>Y</sup>
City	State Zip Code			Amount o	of Each Disk	aura ama	nt thin I	Poriod
Cranston	RI 02910			Amount	or Each Dist		-	
Purpose of Disbursement Lapel Pins		*				-	934.28	3
Candidate Name		Catego	-					
Senate President	ment For: Primary General Other (specify)	71						
State: District:								
Full Name (Last, First, Middle Initial) American Express					ion ID: 2 <sup>-</sup> isbursemer		2379-	0000
Mailing Address PO Box 114				0 9	03	/ Y	ž 0 1 (	) <sup>Y</sup>
•	State Zip Code NJ 07101-0114			Amount o	of Each Disk	ourseme	nt this I	Period
Purpose of Disbursement Credit Card Payment - See Memo Items				L		3	293.56	3
Candidate Name		Catego	- 1					
Senate President	ment For: Primary General Other (specify)	Турс						
State: District:								
Full Name (Last, First, Middle Initial) American Express					ion ID: 21 isbursemer		2379-	04684
Mailing Address PO Box 114				0 9	0 3	/ Y	ž 0 1 (	) <sup>Y</sup>
	State Zip Code NJ 07101-0114			Amount o	f Each Dist	ourseme	nt this I	Period
Purpose of Disbursement Travel Insurance							14.99	)
Candidate Name		Catego						
Office Sought: House Disburse	ment For:	Туре	1	[MEMO I	ITEM]			
Senate President	Primary General Other (specify) ▼							
State: District:								
SUBTOTAL of Disbursements This Page (optional) .			<u> </u>			42	227.84	

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C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 10 / 26				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on X 21b 27	22 23 24 25 26 28a 28b 28c 29 30				
Any Information copied from such Reports and or for commercial purposes, other than using the		d by any person	for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)  Association of State Democratic Cha	irs						
Full Name (Last, First, Middle Initial) Airport Taxi Company			Transaction ID: 21b-01-02379-04697 Date of Disbursement    M				
Mailing Address PO Box 45453			09 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				
City St. Louis	State Zip Code MO 63145		Amount of Each Disbursement this Period				
Purpose of Disbursement Transportation			47.70				
Candidate Name		Category/ Type	INATINO ITEMI				
Office Sought: House Di Senate President State: District:	sbursement For: Primary General Other (specify)		· [MEMO ITEM]				
Full Name (Last, First, Middle Initial) Ted's Bulletin			Transaction ID: 21b-01-02379-04695 Date of Disbursement				
Mailing Address 505 8th Street			0 9 / D 0 3 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code		Amount of Each Disbursement this Period				
Washington Purpose of Disbursement	DC 20003		62.95				
Meals Candidate Name		Category/ Type					
Senate President	sbursement For: Primary General Other (specify)		[MEMO ITEM]				
State: District: Full Name (Last, First, Middle Initial) Aqua Al 2			Transaction ID: 21b-01-02379-04693 Date of Disbursement				
Mailing Address 212 Seventh Street	, SE		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$				
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period				
Purpose of Disbursement Meals	20000		61.70				
Candidate Name		Category/ Type					
Office Sought: House Di Senate President	sbursement For: Primary General Other (specify)	. , , , , ,	[MEMO ITEM]				
State: District:							
SUBTOTAL of Disbursements This Page (opt	ional)		0.00				

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 11 / 26
ITEMIZED DISBURSEMENTS	for each category of the  Detailed Summary Page	(check only	y one)
	Detailed Suffilliary Fage	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
Association of State Democratic Chairs			
Full Name (Last, First, Middle Initial)  Aqua Al 2			Transaction ID: 21b-01-02379-04692
·			Date of Disbursement  0 9 0 3 2 0 1 0
Mailing Address 212 Seventh Street, SE			0 9 0 3 2 0 1 0
•	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement	20000		109.30
Meals			
Candidate Name		Category/ Type	
	ment For:		[MEMO ITEM]
Senate   President	Primary General Other (specify) ▼		
State: District:	ourse (opening)		
Full Name (Last, First, Middle Initial)			<b>Transaction ID:</b> 21b-01-02379-04691
Costco			Date of Disbursement
Mailing Address 999 Lake Drive			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} Y$
•	State Zip Code WA 98027		Amount of Each Disbursement this Period
Purpose of Disbursement	30027		43.75
Stamps Candidate Name		Onto nom /	
		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate	ment For:  Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial)  James P. Walsh Sedan Services			<b>Transaction ID:</b> 21b-01-02379-04690 Date of Disbursement
Mailing Address 1155 Connecticut Avenue	e, NW		$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code DC 20036		Amount of Each Disbursement this Period
Purpose of Disbursement	20000		115.00
Transportation			
Candidate Name		Category/ Type	
	ment For:		[MEMO ITEM]
Senate   President	Primary General Other (specify) ▼		
State: District:	(-p)/ <b>V</b>		
SUBTOTAL of Disbursements This Page (optional) .			0.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 12/26
ITEMIZED DISBURSEMENTS	for each category of the (check		y one)
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
Association of State Democratic Chairs			
Full Name (Last, First, Middle Initial)			Transaction ID: 21b-01-02379-04689
James P. Walsh Sedan Services			Date of Disbursement
Mailing Address 1155 Connecticut Avenue	e, NW		$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$
•	State Zip Code DC 20036		Amount of Each Disbursement this Period
Purpose of Disbursement	20000		95.00
Transportation Candidate Name		October	
Candidate Name		Category/ Type	
	ment For:		[MEMO ITEM]
Senate   President	Primary General Other (specify) ▼		
State: District:	(-  <b>/</b> )		
Full Name (Last, First, Middle Initial)			<b>Transaction ID:</b> 21b-01-02379-04688
National Conference of State Legislators			Date of Disbursement  O 9 0 3 2 0 1 0
Mailing Address 444 North Capitol Street,	NW, Suit		$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$
•	State Zip Code DC 20001		Amount of Each Disbursement this Period
Purpose of Disbursement	20001		107.46
Book Candidate Name			
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburse Senate	ment For:  Primary General		[MEMOTIEM]
President	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 21b-01-02379-04687 Date of Disbursement
Mailing Address PO Box 114			09 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	State Zip Code NJ 07101-0114		Amount of Each Disbursement this Period
Purpose of Disbursement			14.99
Travel Insurance Candidate Name		Category/	
		Туре	[MEMO ITEM]
Office Sought: House Disburse Senate	ment For:  Primary General		[
President	Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional) .			0.00

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SCHEDULE B (FEC Form 3X)		rate schedule(s)	FOR LINE NUMBER: (check only one)    X   21b				GE	13 /	26				
ITEMIZED DISBURSEMENTS		ategory of the Summary Page					22 23 24 25						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													3
NAME OF COMMITTEE (In Full)													
Association of State Democratic Chairs													
Full Name (Last, First, Middle Initial)							Trans	saction II	<b>)</b> :	21b-0 <sup>-2</sup>	1-02	2379-	04698
Laclede Cab Co.							Date	of Disbur	se	ment			
Mailing Address 600 S. Vandeventer Aven	ue						0 <sup>M</sup> 9	M / D	0	3 / Y	ž	0 1 (	) <sup>Y</sup>
,	State MO	Zip Code 63110					Amou	ınt of Eac	h	Disburse	-		
Purpose of Disbursement				0	-							37.20	)
Transportation			L										
Candidate Name					egory/ /pe								
Office Sought: House Disburser	ment For:			' '	γpe	- 1	MEM	IO ITEN	IJ				
Senate President	Primary Other (spec	General cify) ▼											
State: District:													
Full Name (Last, First, Middle Initial) American Express							Date	of Disbur	se		I-02	2379-	04685
Mailing Address PO Box 114							0 <sup>M</sup> 9	M / D	0	3 Y	ž	0 1 (	) <sup>Y</sup>
	State NJ	Zip Code 07101-0114					Amou	ınt of Eac	h	Disburse	men	t this	Period
Purpose of Disbursement Travel Insurance				0							_	14.99	)
Candidate Name					egory/ /pe	١.							
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	☐ General					[IVI E IV	IO ITEN	IJ				
State: District:													
Full Name (Last, First, Middle Initial) Telecharge								<b>saction II</b> of Disbur		21b-0 <sup>-</sup> ment	1-02	2379-	04696
Mailing Address 234 West 44th Street							0 <sup>M</sup> 9	M / D	0	3 / Y	ž	010	) <sup>Y</sup>
	State NY	Zip Code 10036					Amou	ınt of Eac	h	Disburse	men	t this	Period
Purpose of Disbursement Event Tickets							280.50						)
Candidate Name					egory/ vpe	١.		IO ITEM					
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General					LIVI E IV	IO ITEM	1]				
State: District:		•											
SUBTOTAL of Disbursements This Page (optional)					. •							0.00	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 14/26
ITEMIZED DISBURSEMENTS	ZED DISBURSEMENTS   See Separate Scriedule(s)   (check of the separate scriedule(s))   (check of		y one)
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
Association of State Democratic Chairs			
Full Name (Last, First, Middle Initial)			<b>Transaction ID:</b> 21b-01-02379-04683
American Airlines			Date of Disbursement
Mailing Address DFW International Airpor	t		09 0 3 7 2 0 1 0 4
•	State Zip Code TX 75261		Amount of Each Disbursement this Period
Purpose of Disbursement	75261		323.20
Transportation			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:	туре	[MEMO ITEM]
Senate	Primary General		
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: 01b 01 00070 04600
American Airlines			Transaction ID: 21b-01-02379-04682 Date of Disbursement
Mailing Address DFW International Airpor	t		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & O & D \\ O & 3 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix} $
<u> </u>	State Zip Code		Amount of Each Disbursement this Period
	TX 75261		
Purpose of Disbursement Transportation			323.20
Candidate Name		Category/	
		Туре	[MEMO ITEM]
Office Sought: House Disburse Senate			
President	Primary General  Other (specify) ▼		
State: District:	· · · · · · · · · · · · · · · · · · ·		
Full Name (Last, First, Middle Initial) GoDaddy.com			<b>Transaction ID:</b> 21b-01-02379-04681 Date of Disbursement
Mailing Address 375 Collins Road NE			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} \begin{smallmatrix} D \\ 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ 2 \end{smallmatrix} \begin{smallmatrix} Y \\ 0 \end{smallmatrix} \begin{smallmatrix} Y \\ 0 \end{smallmatrix} \begin{smallmatrix} Y \\ 0 \end{smallmatrix} $
	State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement			-4.99
Credit			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ment For:	1 3/00	[MEMO ITEM]
Senate	Primary General		
State: President State:	Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional) .			0.00

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SCHEDULE B (FEC Form 3X)		arate schedule(s)	FOR LIN (check or					R:		PAGE 15 / 26							
ITEMIZED DISBURSEMENTS		category of the Summary Page		·	21b 27	Á	22 28a		23 28b		24 28c	П	25 29	26 30			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														S			
NAME OF COMMITTEE (In Full)																	
Association of State Democratic Chairs																	
Full Name (Last, First, Middle Initial) Hyatt Regency						Transaction ID: 21b-01-02379-04680 Date of Disbursement											
						Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y											
Mailing Address 71 S. Wacker Dr.	ng Address 71 S. Wacker Dr.							09 03 2010									
•	State IL	Zip Code 60606				Amount of Each Disbursement this Period											
Purpose of Disbursement			Т	U	-					0		_	18.62	2			
Credit Candidate Name			Ca	ate	egory/												
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Senate President	ement For: Primary Other (spe	General cify) ▼				[MEMO ITEM]											
State: District: Full Name (Last, First, Middle Initial)											41. 0			0.4070	_		
Hyatt Regency									isburs	eme		1-02	2379-	04679			
Mailing Address 71 S. Wacker Dr.						09						D <sup>Y</sup>					
•	State IL	Zip Code 60606					Amou	nt o	f Each	Dis	burse	men	t this I	Period	_		
Purpose of Disbursement Credit	<u></u>		Т	0				_					-1.52	2			
Candidate Name					egory/ /pe												
Senate President	ment For: Primary Other (spe	General cify) ▼			1	<b>-</b> [	MEM	01	TEM]								
State: District:															_		
Full Name (Last, First, Middle Initial) Hyatt Regency						- 1	Date o	of D	isburs	eme				04678			
Mailing Address 71 S. Wacker Dr.							0 9	М	/ DC	3	/ <b>Y</b>	ž	0 1 (	o <sup>Y</sup>			
City Chicago	State IL	Zip Code 60606					Amou	nt o	f Each	Dis	burse	men	t this I	Period	_		
Purpose of Disbursement				v	-		L.						-0.82	2			
Credit																	
Candidate Name					egory/ vpe		MEM	<u>م</u> ا	TEMI	ı							
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General															
State: District:	, 3 opo	J/ ▼															
SUBTOTAL of Disbursements This Page (optional) .					. •							-	0.00	)			

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SCHEDULE B (FEC Form 3X)	Use separate scriedule(s)   /alaa				IE NUMBER: PAGE 16 / 26 nly one)								
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name								s					
NAME OF COMMITTEE (In Full) Association of State Democratic Chairs													
Full Name (Last, First, Middle Initial) American Express  Mailing Address PO Box 114				Date	Transaction ID: 21b-01-02379-04686  Date of Disbursement  0 9 M / D 3 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	State Zip Code NJ 07101-0114			Amo	ount of Eac	h Disburse	ement this	Period					
Purpose of Disbursement Travel Insurance Candidate Name		ı	tegory/				14.99	9					
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)	<u> </u>	jpo	[MEMO ITEM]									
Full Name (Last, First, Middle Initial) JetBlue Airways  Mailing Address 118-92 Queens Blvd					e of Disbur	0: 21b-0 sement	1-02379- ′ ž 0 1						
,	State Zip Code NY 11375			Amo	ount of Eac	h Disburse	ement this	Period					
Purpose of Disbursement Transportation Candidate Name	11073	ı	tegory/				35.00	0					
Office Sought:  House Senate President State:  Disburse	ment For: Primary General Other (specify)	<u> </u>	jpo	─ [MEI	MO ITEM	1]							
Full Name (Last, First, Middle Initial)  Montmartre Restaurant				1	saction II	D: 21b-0 sement	1-02379-	04694					
Mailing Address 327 7th Street, SE				0 8	) M / D	03 /	žoi	0 Y					
Washington	State Zip Code DC 20003			Amo	ount of Eac	h Disburse	ment this	-					
Purpose of Disbursement  Meals  Candidate Name			1/				103.3	o .					
Montmartre Restaurant  Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		tegory/ ype	[MEI	MO ITEM	ij							
State: District:					· · · · ·	• •	0.04	•					
SUBTOTAL of Disbursements This Page (optional) .			<b>&gt;</b>				0.00	Ų					

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 17/26
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	y one)
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28 28 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
Association of State Democratic Chairs			
Full Name (Last, First, Middle Initial) American Airlines			<b>Transaction ID:</b> 21b-01-02379-04699 Date of Disbursement
Mailing Address DFW International Airpor	t		09 03 7 2010
•	State Zip Code		Amount of Each Disbursement this Period
Dallas Purpose of Disbursement	TX 75261		259.40
Transportation			
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71-	[MEMO ITEM]
State: District:	Care (openit)		
Full Name (Last, First, Middle Initial) JetBlue Airways			<b>Transaction ID:</b> 21b-01-02379-04708 Date of Disbursement
Mailing Address 118-92 Queens Blvd			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
•	State Zip Code		Amount of Each Disbursement this Period
Forest Hills Purpose of Disbursement	NY 11375		329.20
Transportation			
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ment For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) JetBlue Airways			Transaction ID: 21b-01-02379-04706 Date of Disbursement
Mailing Address 118-92 Queens Blvd			09 0 3 7 2 0 1 0 4
	State Zip Code NY 11375		Amount of Each Disbursement this Period
Purpose of Disbursement Transportation			35.00
Candidate Name		Category/ Type	
Senate	ment For: Primary General	. , , , ,	[MEMO ITEM]
State: President  District:	Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			0.00

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	ZED DISBURSEMENTS    Use separate schedule(s)   (chec   X   2-1)		
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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Association of State Democratic Chairs			
Full Name (Last, First, Middle Initial) PQ Capitol Hill, Inc.			Transaction ID: 21b-01-02379-04705 Date of Disbursement
Mailing Address 666 Pennsylvania Avenu	e, SE		$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 3 & 0 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 1 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$
City Washington	State Zip Code DC 20003		Amount of Each Disbursement this Period
Purpose of Disbursement Meals			56.08
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	.,,,,,	[MEMO ITEM]
State: District:			
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 21b-01-02379-04704  Date of Disbursement
Mailing Address PO Box 114			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 3 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 1 \end{bmatrix}$
City Newark	State         Zip Code           NJ         07101-0114		Amount of Each Disbursement this Period
Purpose of Disbursement Travel Insurance			14.99
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) American Airlines			Transaction ID: 21b-01-02379-04703 Date of Disbursement
Mailing Address DFW International Airpor	rt		$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 3 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$
City Dallas	State Zip Code TX 75261		Amount of Each Disbursement this Period
Purpose of Disbursement Transportation			347.20
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	7,62	[MEMO ITEM]
State: District:			
SUBTOTAL of Disbursements This Page (optional)			0.00

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Association of State Democratic Chairs	,,		
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 21b-01-02379-04702
Mailing Address PO Box 114			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 3 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$
City Newark	State Zip Code NJ 07101-011	4	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Insurance			14.99
Candidate Name  Office Sought: House Disbu	rsement For:	Category/ Type	[MEMO ITEM]
Senate President State: District:	Primary General Other (specify)		
Full Name (Last, First, Middle Initial) American Express			Transaction ID: 21b-01-02379-0470 Date of Disbursement
Mailing Address PO Box 114			$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} M \end{smallmatrix} \end{bmatrix} \ \begin{smallmatrix} D \\ O \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ O \end{smallmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} \begin{smallmatrix} D \\ D \\ O \end{smallmatrix} \begin{smallmatrix} D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \end{smallmatrix} \begin{smallmatrix} D \\ D \\ D \\ D \\ D \end{smallmatrix} \end{smallmatrix}$
City Newark	State Zip Code NJ 07101-011	4	Amount of Each Disbursement this Period
Purpose of Disbursement Travel Insurance			14.99
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) American Airlines			Transaction ID: 21b-01-02379-0470 Date of Disbursement
Mailing Address DFW International Airp	port		09 7 03 7 2010
City Dallas	State Zip Code TX 75261	_	Amount of Each Disbursement this Period
Purpose of Disbursement Transportation			347.20
Candidate Name	reamont For	Category/ Type	[MEMO ITEM]
Office Sought: House Disbu	rsement For:  Primary General  Other (specify) ▼		
President State: District:			
State: President District:  SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	0.00

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SCHEDULE B (FEC Form 3X)			FOR LINE	NE NUMBER: PAGE 20 / 26									
ITEMIZED DISBURSEMENTS	Use separate sched for each category of		(check only		_								
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or for commercial purposes, other than using the nan									,				
NAME OF COMMITTEE (In Full)													
Association of State Democratic Chairs													
/													
Full Name (Last, First, Middle Initial) American Express						21b-0	1-02	379-0	04709				
American Express				M M	Disburse	D / Y	/ Y	Y	Υ				
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Purpose of Disbursement			•				1	4.99					
Travel Insurance Candidate Name		<u> </u>	2010 0000 /										
Candidate Name			Category/ Type										
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Senate		neral											
President State: District:	Other (specify)												
Full Name (Last, First, Middle Initial)						041.0	4 00	055					
Perkins Coie LLP					ti <b>on ID:</b> Disburse	21b-0 ement	1-02	355-0	J4653				
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Mailing Address 1201 Third Avenue, 40th	n Floor			0.9		0		0 1 0					
City	State Zip Code			Amount	of Each	Disburse	ment	this F	Period				
Seattle	WA 98101-	3099			•	-	790	0.35					
Purpose of Disbursement Legal Services			• •				700	0.55					
Candidate Name			Category/										
			Туре										
ÿ	ement For:												
Senate President	Primary Ger Other (specify) ▼	neral											
State: District:													
Full Name (Last, First, Middle Initial)				Transac	tion ID:	21b-0	1-02	360-0	04656				
Patton Data Processing					Disburse				_				
Mailing Address PO Box 11849				0 9	/ D 1	D / Y	ž	0 Ĭ 0	) <sup>Y</sup>				
City Lexington	State Zip Code KY 40578	)		Amount	of Each	Disburse	ement	this F	eriod				
Purpose of Disbursement			•				30	0.00					
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Candidate Name			Category/ Type										
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Senate	Primary Ger	neral											
President District:	Other (specify)												
State: District:													
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<b>TOTAL</b> This Period (last page this line number only	)												

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SCHEDULE B (FEC Form 3X)		arate schedule(s)	s) FOR LINE (check only			IE NUMBER: PAGE 21 / 26											
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NAME OF COMMITTEE (In Full)																	
Association of State Democratic Chairs																	
Full Name (Last, First, Middle Initial) Sandler and Reiff, P.C.									ion ID:			1-02	2368-	04667			
Mailing Address 300 M Street SE, Suite 1	102					0 9 M / 2 7 / Y Y Y Y Y											
•	State DC	Zip Code 20003				Amount of Each Disbursement this Period											
Purpose of Disbursement Legal Services			Г	v	•	787.57											
Candidate Name					egory/ vpe												
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American Express							Date	of D	ion ID:	eme				_			
Mailing Address PO Box 114							0 <sup>M</sup> 9	М	<sup>/</sup> 2	27	/ L	ž	0 1 (	) <sup>*</sup>			
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Purpose of Disbursement Credit Card Payment - See Memo Items							L.	0				17	30.05	5			
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Senate President	ement For: Primary Other (spe	General ▼															
State: District:																	
Full Name (Last, First, Middle Initial) Marriott							Date	of D	isburs	eme				04712			
Mailing Address One Marriott Drive							0 <sup>M</sup> 9	М	<sup>′</sup>	27	/ L	ž	0 1 (	) <sup>Y</sup>			
	State DC	Zip Code 20058					Amou	ınt o	f Each	Dis	burse						
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SCHEDULE B (FEC Form 3X)		arate schedule(s)			FOR LIN		NUMBER: PAGE 22 / 26										
ITEMIZED DISBURSEMENTS		category of the Summary Page		-	X 21b 27	É	22 28a	Н	23 28b	24 28c	F	25 29	26 30				
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Association of State Democratic Chairs																	
Full Name (Last, First, Middle Initial)							Trans	acti	ion ID:	21b-0	1-0	2381-	04721				
Talay Thai								_	isburs		· · · ·	,	V				
Mailing Address 406 1st St Se								$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									
,	State DC	Zip Code 20003					Amount of Each Disbursement this Period										
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Candidate Name					tegory/ ype												
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Full Name (Last, First, Middle Initial)				_			Trans	acti	ion ID:	21b-0	1_0'	2221_	04720				
Marriott									isburs		1-04	2301-	04720				
Mailing Address One Marriott Drive						0 9 M / 2 7 / Y 2 0 1 0 Y					) Y						
•	State DC	Zip Code 20058					Amou	nt o	f Each	Disburs	emer	nt this	Period				
Purpose of Disbursement Lodging			Г	_			L.				.3	29.88	3				
Candidate Name					tegory/ ype												
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Full Name (Last, First, Middle Initial)							<b>T</b>			041- 0	1 0	2004	0.4740				
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Association of State Democratic Chairs																
Full Name (Last, First, Middle Initial)  Marriott					ate of I	Disburs	: 21b-0 ement		2381- 2010							
Mailing Address One Marriott Drive				l l	0 9	2	27	. 2	010	)						
•	State Zip Code DC 20058			Δ	mount	of Each	Disburse									
Purpose of Disbursement Meals								0	23.50							
Candidate Name			egory/ ype	'   <u></u>			•									
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)			IN	[MEMO ITEM]											
Full Name (Last, First, Middle Initial) Airport Taxi Company					ate of I	Disburs										
Mailing Address PO Box 45453				T .	0 9	/ L 2	27	Ž	0 1 C	)						
•	State Zip Code MO 63145			Δ	mount	of Each	Disburse	men	t this f	Period						
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Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify) ▼			"												
Full Name (Last, First, Middle Initial) Marriott						tion ID:	: 21b-0 ement	1-02	2381-	04716						
Mailing Address One Marriott Drive				_ [	0 <sup>M</sup> 9 M	/ D	27	Ź	010	) <sup>Y</sup>						
	State Zip Code DC 20058			A	mount	of Each	Disburse			-						
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Association of State Democratic Chairs			
Full Name (Last, First, Middle Initial) Wildflowers Restaurant			Transaction ID: 21b-01-02381-04715 Date of Disbursement
Mailing Address 1013 Ohio Avenue			0 9 M / D 2 7 Y 2 0 1 0 Y
•	State Zip Code MO 63104		Amount of Each Disbursement this Period
Purpose of Disbursement Meals		v v	252.16
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)	21	[MEMO ITEM]
State: District: Full Name (Last, First, Middle Initial)			Turner 10 Odb 04 00004 04740
Marriott			Transaction ID: 21b-01-02381-04713 Date of Disbursement
Mailing Address One Marriott Drive			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ Z & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & 1 & O \end{smallmatrix} \end{bmatrix}$
	State Zip Code DC 20058		Amount of Each Disbursement this Period
Purpose of Disbursement Lodging			329.88
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Landry's Seafood House			Transaction ID: 21b-01-02381-04711 Date of Disbursement
Mailing Address 1850 Market Street			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} & \begin{smallmatrix} D & D & D \\ D & D & D & M \end{smallmatrix} & \begin{bmatrix} Y & Y & Y & Y & D \\ Y & Z & 0 & Y & D \end{bmatrix}$
	State Zip Code MO 63103		Amount of Each Disbursement this Period
Purpose of Disbursement Meals			151.68
Candidate Name		Category/ Type	IMEMO ITEM
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM]
State: District:	· · · · · · · · · · · · · · · · · · ·		I.
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>	0.00

TOTAL This Period (last page this line number only) .....

C.

SCHEDULE B (FEC Form 3X)		rate schedule(s)	FOR LIN (check or				NE NUMBER: PAGE 25 / 26 only one)										
ITEMIZED DISBURSEMENTS		ategory of the Summary Page		È	_	F	22 28a	П	23 28b		24 28c		25 29	$\longrightarrow$	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may no and addres	t be sold or used s of any political	by a	an ım	y perso ittee to	n for solic	the pu it contr	rpos	se of s	olic om	iting co	ontrik omr	outions nittee	5			
NAME OF COMMITTEE (In Full) Association of State Democratic Chairs																	
Full Name (Last, First, Middle Initial)  James P. Walsh Sedan Services							Transaction ID: 21b-01-02381-04714  Date of Disbursement  0 9 0 7 2 7 2 0 1 0										
Mailing Address 1155 Connecticut Avenue																	
•	State DC	Zip Code 20036					Amount of Each Disbursement this Period										
Purpose of Disbursement Transportation Candidate Name					egory/				•				95.00				
Office Sought: House Disburser Senate President State: District:	ment For: Primary Other (spec	General		Ту	/pe		[MEMO ITEM]										
Full Name (Last, First, Middle Initial) Sprint PCS							Date o		isburs		21b-0 <sup>-2</sup> ent		2369- 0 1 (		8		
Mailing Address PO Box 62071							0 9		3	3 0		. 2	010	)			
•	State MD	Zip Code 21264-2071					Amou	nt o	f Each	Di	sburse	men	t this f	Period	_		
Purpose of Disbursement Telephone					•		L.		_	_			99.99				
Candidate Name					egory/ /pe												
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General □															
State: District: Full Name (Last, First, Middle Initial)							Trane	acti	ion ID:	. ,	21b-0	1_02	280-	0471			
Patton Data Processing							Date o		isburs	eme	ent				U		
Mailing Address PO Box 11849							0 9		3	3 0		2	0 i (	)			
	State KY	Zip Code 40578					Amou	nt o	f Each	Di	sburse	men	t this f	Period	_		
Purpose of Disbursement Compliance Services							L.			0		-6	00.00				
Candidate Name					egory/ /pe												
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	☐ General															
State: District:	(1	<b>*</b>															
SUBTOTAL of Disbursements This Page (optional)					. •							-50	00.01				

16445.79

В.

District:

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 26 / 26
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1	X 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	ents may not be sold or used and address of any political	by any person f committee to so	or the purpose of soliciting contributions licit contributions from such committee
NAME OF COMMITTEE (In Full) Association of State Democratic Chairs			
Full Name (Last, First, Middle Initial) Washington State Democratic Party		Transaction ID: 22-01-02354-04652 Date of Disbursement	
Mailing Address 615 Second Avenue, Ste.	580		$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 3 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 \\ 0 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$
7	State Zip Code WA 98104		Amount of Each Disbursement this Period
Purpose of Disbursement		· ·	129.21
Candidate Name		Category/ Type	
Office Sought: House Disburset Senate President State: District:	ment For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transportion ID: 00.01.00000.04005
South Dakota Democratic Party			Transaction ID: 22-01-02366-04665  Date of Disbursement
Mailing Address 309 West 43rd Street, ST	E 107		$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ / $\begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix}$ / $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$
,	State Zip Code SD 57105		Amount of Each Disbursement this Period
Purpose of Disbursement			515.30
Candidate Name		Category/ Type	
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	•	644.51
TOTAL This Period (last page this line number only)	•	644.51

State: